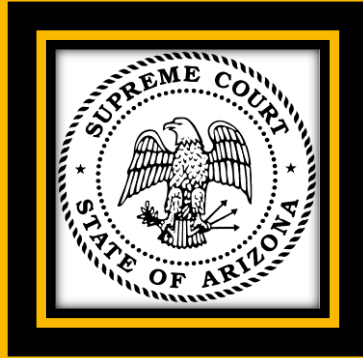


ARIZONA SUPREME COURT ADMINISTRATIVE OFFICE OF THE COURTS



COCONINO COUNTY ADULT PROBATION

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Operational
Review

Final Report

June 2019

**Coconino County Adult Probation Department
Operational Review Final Report**

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EXECUTIVE SUMMARY

Overview

Arizona's adult probation system is decentralized, with each of the 15 local probation departments reporting directly to the presiding judge of the superior court or court administrator in their respective county. In accordance with the administrative and supervisory authority established under Article VI, Section 3 of the Arizona Constitution and in cooperation with the local probation departments, the AOC has developed and implemented a comprehensive operational review process.

Objective

The APSD's operational review team conducts reviews in accordance with the Arizona Judicial Department's *Advancing Justice Together: Courts and Communities* strategic agenda. Operational reviews assess and document adult probation departments' operational and program performance to assist in building effective community supervision practices. The objective of the review team is to ensure accountability and compliance with Arizona Revised Statutes (A.R.S.), the Arizona Code of Judicial Administration (ACJA), Administrative Orders (AO), Administrative Directives (AD), Arizona Rules of Court, approved program plans, funding agreements, and local policies and procedures. The review is designed to identify areas of non-compliance and make recommendations for corrective action, while promoting an atmosphere of collaboration and facilitation of technical assistance. To this end, the review team inspects the department's policy manual and response to the SAQ, reviews case files, program files, and all correspondence and reports submitted to the APSD. The review team also conducts Minimum Accounting Standards (MAS) and Firearms verifications with appropriate staff working with MAS and Firearms/Ammunition and Defensive Tactics.

The on-site portion of the Coconino County Adult Probation Department operational review was conducted January 7 - 8, 2019. Pre-review work began in May 2018. The review team consisted of Carol Banegas-Stankus, Ivan Ramirez, Jane Price, Susan Alameda, and Carissa Moore.

Recommendations are provided in areas where less than 100 percent compliance is achieved. A department response is not required in areas with 90 percent or above compliance; however, feedback is always welcomed and very much appreciated. After the final report is published, the review team and AOC staff will work collaboratively with the department to develop a corrective action plan to assist the department in resolving all issues identified in this report.

Reponses received from the Department are incorporated into the report verbatim. When a typographical error is contained in the department's response *[sic]* is used to indicate that something incorrectly written is intentionally being left as it was in the original verbatim statement.

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Overall Conclusion

Number of Standards Exceeded:	0
Number of Standards Met:	94
Number of Standards Not Met:	64
Number of Standards Not Applicable:	18

COCONINO COUNTY ADULT PROBATION FY 2018 ACCOMPLISHMENTS

“Awards and Recognition:

- National Association of Counties – Excellence award for our distance learning grant, Coconino Online Probation Education (COPE); COPE was also highlighted in American Probation and Parole Association’s *Perspectives*.
- Community Partner of the Year award – Criminology and Criminal Justice Department, Northern Arizona University.
- 2017 Presiding Judge Award to Division Director Mary Walsh-Navarro.
- Probation Officer Kathalin Walker and Deputy Chief Michelle Hart were recognized at the National Public Service Awards.
- County was selected by SAMHSA as a “Best Practice” site, in part, for work done at Adult Probation. SAMHSA conducted a local site visit in May and subsequently local representatives, including Adult Probation Chief Sarah Douthit and Jail Commander Matt Figueroa, have served as faculty for SAMHSA Academies focused on teaching other jurisdictions the methods and approaches we use to obtain and utilize data and technology.
- Probation Officer Stephanie Gerst was recognized at the Athena Awards as a nominee (a community award).
- Retired Probation Supervisor Karen Madden was unanimously selected for the Lifetime Achievement Award by the Arizona Chief’s Association.
- Probation Officer Demetrius Evans was recognized by the Veteran’s Stand Down Committee.

Personnel and Culture

- Stay *[sic]* Interviews – Chief Sarah Douthit conducts with all staff on an annual basis to encourage retention.
- Updated our Department and PTS vision/mission statement with staff participation.
- Created an extensive FTO process and training manual.
- Evaluation updates – updated officer evaluations by position type. Field Officers’ evaluations mirror Op Review categories. In other words, our new evaluations are in alignment with requirements of the state. We are currently working on updating all position evaluations with staff input.
- Telecommuting policy was created and implemented.
- Created Guiding Principles with all staff.
- Chief Douthit recruited for the County Transformational Leadership initiative and County Pay for Performance project.

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- Department leadership participated in “Creating Cultural Change” and “Hardwiring Teamwork” training to transform department culture.
- Chief Douthit participated in national Implementation Leadership training.
- Restructured positions to create an APETS unit.
- Contracted for MRT services to allow officers to remove this task from their workloads. MRT services now paid (mostly) through AHCCCS funding.

Community and County Outreach

- Implemented a NARCAN program. All field officers have been trained to administer NARCAN and carry it in the field to address potential overdoses.
- CCAPD hosted an OST and PSA training for attorneys.
- CCAPD hosted EPICS training for the Court.
- Staff participated in “Shop with a Cop” for the holidays.
- Staffed the Veteran’s Stand Down.
- Staff person assigned to the County’s Emergency Operations Center.
- Donated holiday presents to 31 probation families that amounted to 73 children.
- Change of Pace Running Club continues to partner with the community. Further, the club has added “Change of Pace Little Hearts” to cover the gifting side to probation families.
- Celebrated Pretrial, Probation, Parole Supervision Week with departmental staff.
- Participated in a law enforcement “Facebook Lip Sync Challenge” which went “viral” and was well-received by the community.
- Numerous staff members have facilitated several local, state and national webinars, panels and presentations.

Technology Improvements

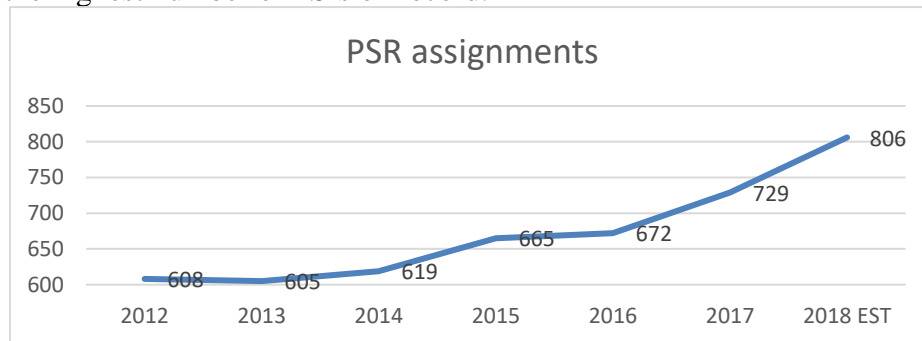
- Revised our “Auto forms” to make paperwork more efficient for officers.
- Participating in both a local and state financial workgroup. Locally, we are working with our Clerk’s Office to allow probation staff to enter financials directly into AJACS.
- Created a department Facebook page and social media policy.
- Purchased text-to-talk software to expedite report writing.
- Contracted with Survey Gizmo to automate new case review process.
- An electronic staff work calendar was implemented.

Programs and projects

- Fresh Start Art – received a grant from the Arizona Commission on the Arts to partner with Victim Witness. The grant, in part, will allow us to create a community mural painted by probation clients. The theme of the mural will be healthy relationships.
- Collective Impact – the County approved a position for CCAPD to partner with Juvenile Court to do collective case management for families involved in both systems.
- Staff created a sanction work crew to allow clients to do work service as a result of a violation.
- Starting a process for the local validation of the PSA.
- Revamped department policies - “leaning” our practices to reduce redundancies.
- ASU capstone project – partnered with ASU to have research informed recommendations to implement Fair Justice initiatives.
- Created a pretrial desk manual.
- Started an ACJIS audit from DPS.
- Completed a Deferred Prosecution audit from the Attorney General’s Office.

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- Successfully hosted the first year AmeriCorps program funded by the AOC.
- COPE – final year of the grant; Kara McAlister conducted an AOC presentation for Chief Probation Officers and will be participating on a workgroup related to teleservices.
- We had the highest number of PSIs on record.



Training

- As funding permits, staff continue to attend training hosted by the American Probation and Parole Association, National Drug Court Institute, and the National Association of Pretrial Supervision Agencies, among other local and national trainings.
- We continue to conduct EPICS -II training and added more coaches.
- We have focused on emergency preparedness and participated in Continuity of Operations Planning training and FEMA training.

Appointments/Elections

- Deputy Chief Michelle Hart served as the President of the Arizona Association of Drug Court Professionals and participated in the coordination of the Annual Arizona Problem Solving Conference.
- Deputy Chief Michelle Hart – Served as contract faculty for NDCI (Tune-Ups – working with teams to review policies and procedures to best practices and current research findings)
- Chief Douthit elected to serve as Regional Representative for Region 14 for the American Probation and Parole Association and appointed to the Committee on Probation Education.

Outcome Measures

Work Crew

- Our work crew provided 2082.5 hours of services, which resulted in a labor savings of \$47,543.55.

Probation Supervision

- Between FY08 and FY18, department saw a 33% reduction in the percent of revocations to ADOC (draft department calculations).
- Between FY08 and FY18, department saw a 60% reduction in the percent of probationers with a new felony conviction (draft department calculations).

Pretrial

- Calendar year 2018 jail bed days saved: 63,914
- Calendar year 2018 \$ saved: \$5,446,120.98 (63,914 x \$85.57/day)
- Safety rate: 91% (no new arrests on pretrial)
- Appearance rate: 88%”

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ADMINISTRATION AND MANAGEMENT

Each probation department fulfills a variety of general administrative and management functions which directly effects the department's performance and effectiveness in its supervision of probationers. Many of these functions are accomplished in accordance with Statutes, the ACJA, AOs, ADs, funding agreements, and local policies and procedures. The review team assessed the department's compliance with administrative and management functions in the following areas: departmental policies and procedures, officer certification, education and training requirements for department staff, general reporting obligations, MAS, supervisory case file review, and pre-sentence investigation (PSI) reporting.

The following Findings Key is used throughout the report to reflect the department's compliance with each of the review areas:

Findings Key:

Exceeds Standard: Substantially exceeds requirement of standard based on a higher standard required by the department's policy

Meets Standard: Substantial compliance with the standard for the relevant review period. Must meet a compliance of 100%-90%

Does Not Meet Standard: Requires corrective action when compliance is 89%-0%

Compliance Rating Not Applicable: A compliance percent is not given to a specific area of review

Policies and Procedures

Pursuant to **ACJA § 6-105(D)(2)(b)**

The AOC, APSD Subject Matter Experts reviewed policies from the department's policy and procedure manual. Results of the review are as follow:

POLICY AND TITLE	RECOMMENDED REVISIONS
Section 4 Vehicles	The link provided for ACJA 6-111 is not valid, please replace with the following link: https://www.azcourts.gov/Portals/0/admcode/pdfcurrentcode/6-111_Amended_11-28-11.pdf For consistency purposes, please replace the word "operator's" with the word "driver's."
Section 15 Interstate Compact Supervision	Investigation Requests on Probations Who are not yet Residing in Coconino County II. Please add "If the offender is found to be in Coconino County without permission, notify the AOC Compact Office immediately." Coconino County has discretion to reject the case for this reason alone. Outgoing Interstate Compact Cases I. Please add "If

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POLICY AND TITLE	RECOMMENDED REVISIONS
	allowing a probationer to apply for outgoing transfer, ensure all the information and reasons for transfer provided by the probationer are verified by Coconino County”.
Section 16 Intercounty Courtesy Transfers	<p>Intercounty Courtesy Transfers Section, please add that Transfers of Jurisdiction are an option under Rule 27.2b.</p> <p>Probation Violation Procedures for out of County Clients Section, do not paraphrase subsection L. but instead please refer to ACJA 6-211 L. for violation procedures or type them verbatim.</p> <p>Procedure to Transfer Supervision to Other Arizona Counties, Section IX and XIII, the Arizona Intercounty Transfer Agreement no longer exists due to code changes effective 8/8/2018.</p>
Section 21 Sex Offender Supervision	<p>VII Field Officer Protocol: E. Treatment and Evaluation Issues: There is no longer best practice guidance on an annual polygraph. Please change the ‘shall’ to a ‘may’ since the policy does allow for justification if a poly is not completed annually.</p> <p>IX. Travel Permits for Sex Offenders. The language in this policy is not as restrictive and/or does not mirror the language in Section 54 Supervision Strategies III. Procedure. c. Travel Permits. For consistency purposes, please revise the language in one or both policies to mirror the department’s requirement.</p>
Section 27 New Client Intake (Field Officers)	<p>Clients Sentenced to Jail or Prison, Followed by Probation: bullet #4, please refer to ACJA 6-201.01(I)(1)(a) for the new code language.</p> <p>Using the Standardized Implementations: bullet #8, sub-bullet #3, per ARS 13-918(8) effective 10/3/2018, please remove “IPS clients must submit all wages...” as this is old code language.</p> <p>Collect Mandatory DNA Sample: Please reference ARS 13-610(L) and (O)(3) for mandatory misdemeanor cases.</p>
Section 31 Officer Safety Equipment and Use of Force	<p>In 2006 the International Association of Chiefs of Police (IACP) issued a position paper on use of force policy. It stated that the use of force policy should remain short in length and simple in context. The IACP paper reported that due to the importance of the use of force policy, it should not be cluttered with extraneous information that may discourage the officer from reading it or hinder retention due to non-pertinent information. Therefore, it is recommended that the use of force be a standalone policy that does not include equipment or other protocols.</p> <p>ACJA 6-113 states that unintentional discharges with injury and intentional discharges will require a shooting inquiry board. Please take language from Firearms involved incident</p>

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POLICY AND TITLE	RECOMMENDED REVISIONS
	resulting in injury and call-out protocol 4.e. and include in the Non-injury section.
Section 56 Standard Supervision	<p>Minimum Supervision Requirements for in-custody clients: bullet #2, please refer to ACJA 6-201.01(I)(1)(a) for the new code language.</p> <p>Standard Probation (Table): Risk Level High. Please add ACJA 6-201.01(K)(4) language, "...with at least one occurring with the probationer at the probationer's residence."</p> <p>Risk Level Medium. Please add ACJA 6-201.01(K)(6) language, "...with at least one occurring with the probationer at the probationer's residence every three months."</p>

Noteworthy: Twenty-six of the 33 policies submitted by the department for review met standard.

Department Response: "Policies have been updated and attached."

Required Corrective Action: None required.

Recommendation: The quality assurance process can include the Department conducting an annual review of ACJA revisions and ensuring that policies are revised accordingly. Also, a training component for officers and staff can be included in the quality assurance process.

Employment

Pursuant to ACJA § 6-106(H)(3)(b-c), (F)(3)(a), and (H)(1 through 8)

Personnel files for 28 probation officers were selected for review. The results are as follows:

Employment Qualification Review					
Requirements	Yes	No	N/A	% Compliance	Meets Standard
Verification of bachelor's degree-for PO	27	1	0	96%	<input checked="" type="checkbox"/>
Verification of high school diploma/GED-for SO	0	0	28	N/A	<input type="checkbox"/>
National and State Criminal History check before hire	28	0	0	100%	<input checked="" type="checkbox"/>
Before hire, was a driving records check through AZ MVD and any other previous state of residence conducted	13	15	0	46%	<input type="checkbox"/>

Noteworthy: The Department did an excellent job in meeting minimum code compliance in two of the four review areas.

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Department Response: “The Department recognized this oversight while we were conducting a review of our personnel files and completing data entry. As of January 2017, we had a transition in the position of System’s Security Officer (SSO). At the time of the Operational Review, we were unable to verify these queries were done for several employees prior to this date. However, our new hire checklist has been updated and the SSO has been made aware of this requirement. The New Employee Checklist is attached. Exhibit H.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a new hire checklist, personnel checklist, or an annual personnel review checklist.

Officer Certification/COJET/Training

Pursuant to ACJA §§ 6-104 (F)(1) and 6-106 (J)(1)(b) adopted via AO 2006-99, ACJA §§ 1-302(K)(4), 6-104 (G)(1)(a), and 6-107 (E)

Personnel files for 28 probation officers were selected for review. The results are as follows:

Officer Certification Training					
Requirements	Yes	No	N/A	% Compliance	Meets Standard
Eight (8) hours of officer safety training within 30 days of hire	27	0	1 ¹	100%	<input checked="" type="checkbox"/>
Completion of PO Certification Academy within one (1) year of the date of hire/date in position	26	0	2 ¹	100%	<input checked="" type="checkbox"/>
Certification requested by CPO after one (1) year of service has been completed from hire date/date in position	21	2 ¹	5	91%	<input checked="" type="checkbox"/>
Completion of IPS Academy within one (1) year of assignment	8	0	20	100%	<input checked="" type="checkbox"/>

¹Includes new hires with less than 1 year of service at time of operational review, terminations prior to one year of service, and/or CPO.

Noteworthy: The Department did an excellent job in meeting minimum code compliance in all review areas, with 100 percent compliance in three of the four areas.

Department response: None required

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a training records checklist, personnel checklist, or an annual personnel review checklist.

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Continuing Employment

Pursuant to ACJA § 6-106 (J)(1)(f), ACJA §1-302, and ACJA § 6-107(h)(7)(a) & (b)

Personnel files for 28 probation officers were selected for review. The results are as follows:

Biannual Criminal History & Annual MVD Check					
Requirements	Yes	No	N/A ¹	% Compliance	Meets Standard
Criminal History Check Every 2 Years	21	0	7	100%	<input checked="" type="checkbox"/>
If the employee operates a state/county/personal vehicle, were annual MVD reviews conducted	26	0	2	100%	<input checked="" type="checkbox"/>

¹Includes officers with less than one year of services or terminated prior to one year of service.

Continuing Education					
Requirement	Yes	No	N/A ¹	% Compliance	Meets Standard
2018 Annual Continuing Education Requirement	66 ²	0	0	100%	<input checked="" type="checkbox"/>

¹N/A includes exempt officers.

²Includes all probation and surveillance officers.

Noteworthy: The AOC, APSD congratulates the Department in achieving 100 percent compliance in all three review areas.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue the great work in this review area.

Firearms

Pursuant to ACJA § 6-113

Of the 28 probation officer personnel files selected for review, 21 are armed officers. The results are as follows:

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Firearms						Meets Standard
Requirements	Yes	No	Total	N/A¹	% Compliance	
ACJA § 6-113(E)(1); Officer submitted written request to carry to CPO	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(4); CPO acts on officer initial request to carry within 30 days	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(g)(1-7); Officer signs form attesting to 7 Items	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(a); Officer completed psychological testing	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(b); Criminal history records check completed	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(c); Officer completed and demonstrated proficiency in all defensive tactics training	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(d); Officer signed form indicating medically/physically able to perform armed officer duties	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(e); Officer completed Firearms Training Academy	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(E)(2)(f); Officer completed competency test & training course on ACJA 6-112 & 113	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(G)(3); CPO approves/disapproves request to carry within 30 days after officer completes all requirements	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(H)(1); Officer signed form indicating an understanding of the terms & conditions in code and any department policy regarding use of firearms	21	0	21	7	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(G)(4)(5); For denial, temporary suspension or revocation to carry, CPO must provide written reasons, place in personnel file, & copy officer & officer's supervisor	0	0	0	28	N/A	<input type="checkbox"/>

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Firearms						Meets Standard
Requirements	Yes	No	Total	N/A¹	% Compliance	
ACJA § 6-113(H)(3); Completed annual re-qualification & participated in all required practice sessions	21	0	21	7	100%	<input checked="" type="checkbox"/>

¹N/A includes unarmed officers, any officer not completing a requirement, carry for less than a year, or is the CPO.

Noteworthy: The AOC, APSD commends the Department for achieving 100 percent compliance in all review areas above.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue the excellent work in these review areas.

Pursuant to **ACJA § 1-302(K)(6)**

Code Standard for CPO Training	Meets Standard
Every chief probation officer shall attend at least one program conducted out-of-state or in-state by an established, nationally recognized training organization every three years.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Noteworthy: The AOC, APSD commends the Department for meeting standard in the CPO Training review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue the good efforts in this review area.

Minimum Accounting Standards (MAS)

Pursuant to **ACJA § 1-401(E)(1)**, **ACJA § 1-401(E)(4)**, **ACJA § 1-401(F)(2)**, **ACJA § 1-401(F)(10)**, and **ACJA § 1-401(F)(12)**

Meets Standard: <input type="checkbox"/>
--

The AOC, Court Services Division provided the operational review team with a copy of the Department's most recent MAS Compliance Checklist form (Reporting Year 2017). The MAS Compliance Checklist was submitted by the Department and received by AOC, Court Services

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Division on time (February 5, 2018). Also provided by the AOC, Court Services Division was the Departments most recent triennial audit (Reporting Year 2016). The independent triennial report was received by the AOC, Court Services Division on time (November 2016). The Department does not submit a request for MAS exemption/waiver as their financial system is fully automated.

The Department has authorized personnel who collect money from probationers at the following reporting locations: Flagstaff and Page. Office locations are assigned a receipt book that is used for probationer payments for fines/fees/restitution.

The Flagstaff location collects fines/fees in the form of cash, money orders, cashier checks, and credit cards. The department uses QuickBooks for issuing receipts but on occasion a manual receipt is provided. Manual receipts do not contain the appropriate probationer case number. The department does maintain locked drawers for payments received during business hours and any monies kept overnight are stored in a locked immovable safe located in a secure area.

The Page location accepts money orders for fines/fees, cash payments are not accepted. Monies kept overnight are stored in a locked immovable safe located in a secure area. Locking bags or tamper-proof plastic bags to transfer court monies for deposit are not utilized. Financial records are stored in a safe, locked cabinet, or secure area.

Noteworthy: Overall, the department does a good job in safeguarding all financial records and payments as required by Administrative Order No. 97-62 and ACJA 1-401.

Department Response: “Our departmental policies *[sic]* and procedures do contain the requirement that all manual receipts must have a case number. This expectation was reiterated to departmental financial staff by Senior Administrative Manager Shannon Vieira on May 8, 2019. Exhibit I. For clarification, the Page Office does not collect any cash. If a money order is received, the payment is receipted in QuickBooks. The money orders are scanned the same day for electronic deposit to the bank. The deposited money order is retained in the safe for a period of two months just to confirm it has been deposited. In Page, there is no money being transported to require a locked bag.”

Additional Department Response: “Page satellite office utilizes a priority mailing envelope with the glue seal as our secure method to transport funds to the Flagstaff office, via the postal service. The package is prepared and sealed at the probation office, prior to taking it to the post office for delivery.”

Required Corrective Action: None required

Recommendation: A checklist for periodic financial reviews would ensure that authorized personnel is following required MAS procedures to safeguard all monies and financial records. The quality assurance process may also include a staff training component on ACJA 1-401 and AO 97-62.

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Financial and Statistical Reports

Pursuant to ACJA § 6-201.01 (F)(12-13), ACJA § 6-201.01 (F)(16-17), ACJA § 6-202.01 (F)(10-11), and ACJA §6-202.01 (F)(14-15)

According to the AOC, APSD Budget Analyst, mid-year and closing reports were received from the department on time and are accurate. Monthly budget reports were also received in proper format within specified time frames.

Code Standard for Financial	Meets Standard	
Closing financial and program activity reports through December 31, 2017 submitted to the AOC by January 31, 2018.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Closing financial and program activity reports through June 30, 2018 submitted to the AOC by August 31, 2018.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

According to the AOC, APSD Data Statistical Specialist, annual hand count reports and performance measures were submitted on time during FY 2018.

Code Standard for Statistical Reports	Meets Standard	
Probation Departments operating an IPS program shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Probation Departments providing standard probation services shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's IPS population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's standard probation population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Noteworthy: The Department is commended for meeting standard in all review areas.

Department response: None required

Required Corrective Action: None required

Recommendation: Keep up the good work in these review areas.

Pre-sentence Report (PSR)

Pursuant to Arizona Rules of Court 26.4(B)

For fiscal year 2018 (July 1, 2017 to June 30, 2018), the Department reported that 790 PSR's were completed with 721 (**91 percent**) submitted to the Judge within two business days of sentencing.

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According to performance measures reported by the Department during this time frame, 801 PSR's were completed.

Meets Standard: <input checked="" type="checkbox"/>

Noteworthy: The Department did a good job meeting standard in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: The Department can utilize APETS reports designed to pull PSR data which can be compared with monthly performance measures submitted to APSD. The reports will assist in ensuring the accuracy of reporting PSRs completed and submitted.

Fleet Management

Pursuant to **ACJA § 6-111, A.R.S. § 38-538.02**, and the Arizona Department of Administration Fleet Management Rule R2-15-202.

According to the AOC, APSD Fleet Specialist, the Department's compliance with fleet management requirements are as follows:

Code Standard for State Fleet	Meets Standard	
Department maintains a vehicle database or log that shall include, but not limited to; name of operators and location of vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department conducts annual Motor Vehicle Department (MVD) reviews of all department employees operating a state vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
The Chief Probation Officer shall delegate management of the department's state vehicles to an employee of the Department.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
State vehicle damage or loss is reported to the AOC and ADOA Fleet Management within the next business day.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Noteworthy: The Department did a good job meeting standard in three of the four review areas.

Department Response: "The Vehicle policy has been updated to include: All vehicle damage or loss shall be reported the Vehicle Liaison to report to the AOC and ADOA fleet management within the next business day. Exhibit A."

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include periodic fleet requirement reminders during staff meetings and refresher code training conducted by the Fleet Liaison.

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COMMUNITY PROTECTION

The probation department has a responsibility to enhance public safety through careful supervision and monitoring of individuals receiving a suspended sentence. The review team assessed the Department's compliance with these criteria in the following areas:

- Minimum contact standards for standard supervision cases
- Minimum contact standards for intensive supervision cases
- Minimum contact standards for sex offender cases
- Management of absconder cases
- Victim notification requirements

Tracking System

Pursuant to ACJA 6-201.01(J)(4), ACJA 6-202.01(L)(1)(e), and Statewide APETS Policy - Minimum Use Mandates (B)(1)

Contacts/case notes must be entered in APETS within 72 hours. During September 1, 2018 through November 30, 2018 there were 20,589 contacts (**90 percent**), 18,625 contacts were entered on time.

Meets Standard:	Y
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Standard Probation Supervision (SPS) Contacts

Pursuant to ACJA §§ 6-201.01(K)(8)(a), 6-201.01(K)(6), and 6-201.01(K)(4)(a, b)

A review of 78 SPS case records was conducted. The period reviewed for contacts was September 2018, October 2018, and November 2018. Of the 78 case records reviewed, 13 were on maximum supervision, 60 were on medium supervision, and 5 were on minimum supervision. Information in APETS revealed the following:

Supervision Level	September 2018	October 2018	November 2018
Minimum	5	5	5
Medium	60	60	60
Maximum	13	13	13
Total¹	78	78	78

¹Includes probationers whose start dates was the following month and/or on IPS/Jail/DOC during the review period.

Credit was not given for a collateral contact if the contacts/case notes screen in APETS did not contain meaningful dialogue with the person.

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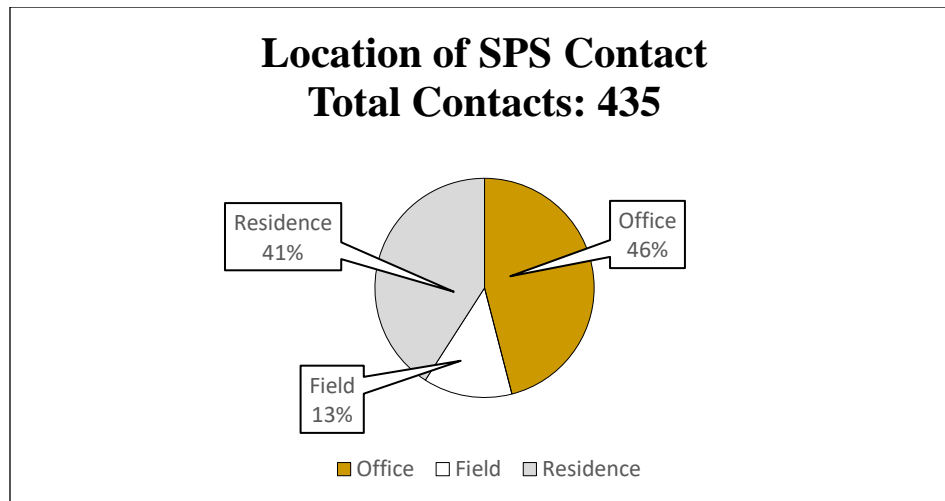
Required SPS Minimum Level Supervision Contacts			
Requirements Met	September 2018	October 2018	November 2018
Yes	5	5	5
No	0	0	0
N/A ¹	0	0	0
Total	5	5	5
% Compliance	100%	100%	100%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

¹NA includes probationers whose SPS start date was the following month and/or was in jail during the review period.

Required SPS Medium Level Supervision Contacts			
Requirements Met	September 2018	October 2018	November 2018
Yes	54	50	46
No	1	5	9
N/A	5	5	5
Total¹	60	60	60
% Compliance	98%	91%	83%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Required SPS Maximum Level Supervision Contacts			
Requirements Met	September 2018	October 2018	November 2018
Yes	9	7	6
No	0	0	1
N/A	4	6	6
Total¹	13	13	13
% Compliance	100%	100%	86%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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Noteworthy: The Department did an excellent job attaining 100 percent compliance in seven of the nine review areas.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review Standard 2019 Master – Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of Client Level Reports in APETS Application, i.e. Client Contact Compliance, utilization of Periodic Reports in APETS Reports Application, i.e. SPS Supervision Levels by Caseload for supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Intensive Probation Supervision (IPS) Contacts

Pursuant to ACJA § 6-202.01 (N) (3)(a) and (4)(a), (5)(a), (6)(a)

The Department has one, two-person and six, one-person IPS teams. For offender and employer contact compliance review, 44 intensive probation cases were reviewed for contact compliance. A review of the contacts/case notes screens in APETS during a 12-week period from September 1, 2018 to November 25, 2018 revealed the following.

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IPS Contact Summary – One/Two Person IPS Teams												
Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	28	32	28	29	31	27	31	31	36	26	25	30
No	4	1	4	4	4	9	6	5	2	9	8	2
N/A¹	12	11	12	11	9	8	7	8	6	9	11	12
Total	44	44	44	44	44	44	44	44	44	44	44	44
% Compliance	88%	97%	88%	88%	89%	75%	84%	86%	95%	74%	76%	94%
Average % Compliance	86%											
Meets Standard	N											

¹NA refers to intensive probationers in jail during the review period or recently transitioned to standard supervision.

The following represents IPS probationer with employer contacts for the one and two-person IPS teams during the review period:

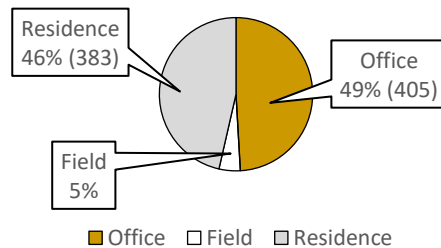
IPS Contact with Employers – One/Two Person IPS Teams												
Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	7	5	11	6	10	9	8	7	10	10	6	9
No	0	0	0	2	2	1	2	3	2	2	2	1
N/A¹	15	17	11	14	10	12	12	12	10	10	14	12
Total	22	22	22	22	22	22	22	22	22	22	22	22
% Compliance	100%	100%	100%	75%	83%	90%	80%	70%	83%	83%	75%	90%
Average % Compliance	86%											
Meets Standard	N											

¹NA refers to intensive probationers in jail, residential treatment, unemployed during the review period, or recently transitioned to standard supervision.

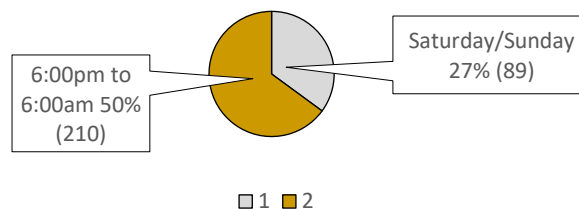
A review of the contacts/case notes screen in APETS revealed that during the review period a total of 825 face to face contacts were made with 44 IPS probationers. The first chart below shows the total contacts made per location and the second chart shows the variation of field and residence contacts.

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**Location of Probationer IPS
Contact**



**Varied Face to Face IPS Contacts
for
Residence and Field (420)**



Noteworthy: Although the overall average percent does not meet standard, the AOC, APSD acknowledges that the Department did meet standard in three of the twelve weeks for face-to-face contacts, and five of the twelve weeks for employer contacts.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review IPS 2019 Master – Exhibit M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of Client Level Reports in APETS Application, i.e. Client Contact Compliance, utilization of Periodic Reports in APETS Reports Application, i.e. IPS Supervision Levels by Caseload for supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

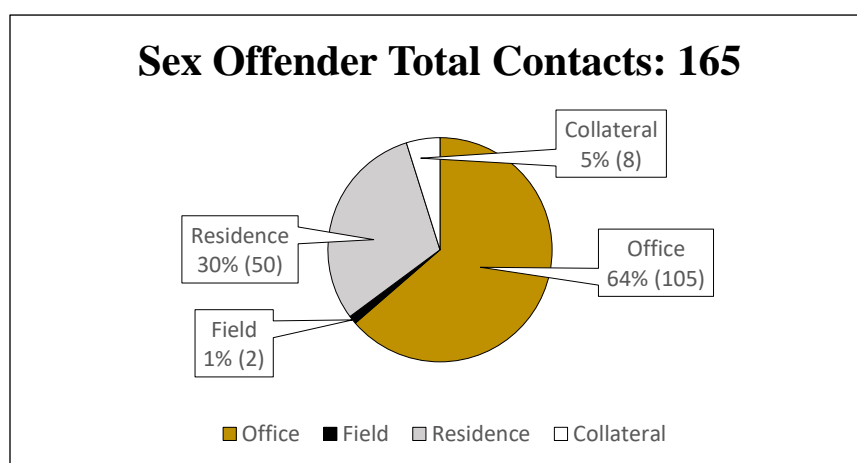
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Sex Offender Contacts

Pursuant to ACJA §§ 6-201.01(K)(8)(a), 6-201.01(K)(6) and 6-201.01(K)(4)(a, b)

A review of 33 SPS and 1 IPS sex offender case records was conducted. The period reviewed for contacts was September 2018, October 2018, and November 2018. Of the 34 case records reviewed, 3 were maximum supervision, 25 were medium supervision, and 6 were minimum supervision. Information in the case file and APETS revealed the following:

Required Supervision Contacts for Sex Offender Cases			
Requirement Met	September 2018	October 2018	November 2018
Yes	31	30	28
No	1	1	3
NA	2	3	3
Total	34	34	34
% Compliance	97%	97%	90%
Meets Standard	Y	Y	Y



Noteworthy: The Department did a very good job achieving compliance in all review areas.

Department response: None required

Required Corrective Action: None required

Recommendation: Please continue to ensure that contacts with probationers results in minimum code and statute requirement compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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Absconders/Warrants

Pursuant to ACJA § 6-201.01(J)(10)(a-g), ACJA § 6-105.01(E)(2)(g)(1)(3)(4)(5)(6), and A.R.S. § 13-805(C)(1)(2)

Documentation in APETS and case files was reviewed for 30 absconder cases (4 IPS and 26 SPS). At the time of the review the sample of cases to be reviewed was generated and identified as absconders/warrants. Subsequently, some of the probationers may have been apprehended. Nevertheless, these cases were reviewed as an absconder/warrant case. The review findings are listed in the tables below:

Activity to Locate <u>Before</u> Warrant Issued						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
IPS Warrant Requested within 72 Hrs.	2	2	26	30	50%	<input type="checkbox"/>
SPS Warrant Requested within 90 days	25	1	4	30	96%	<input type="checkbox"/>
Residence Checked	10	5	15	30	67%	<input type="checkbox"/>
Collaterals Checked	10	6	14	30	63%	<input type="checkbox"/>
Employment Checked	3	2	25	30	60%	<input type="checkbox"/>
Activity to Locate <u>After</u> Warrant Issued						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
After warrant issued, criminal history check done	14	16	0	30	47%	<input type="checkbox"/>
Residence Checked	7	6	17	30	54%	<input type="checkbox"/>
Employment Checked	0	3	27	30	0%	<input type="checkbox"/>
Opted-In Victim Notified	1	0	29	30	100%	<input type="checkbox"/>

Requirement Met	CRO Filed Upon the Expiration of 90 Days
Yes	9
No	19
N/A	2
Total	30
% Compliance	32%
Meets Standard	<input type="checkbox"/>

Noteworthy: The Department achieved compliance in two of the ten review areas.

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Department Response: “We have updated our processes for probation officers filing warrants. A checklist will now be required when the officer submits a warrant for review. The supervisor will now monitor this process. See attached checklist. Exhibit N.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of an absconder/warrant case checklist, the use of the Client Tickler screen in APETS would assist in providing 90/60/30 days notification to run warrant checks and filing the CRO, plus supervisory case file reviews and code and statute training.

Sex Offenders

Pursuant to A.R.S. §§ 13-3821, 13-3822, 13-3825, and 13-610

The relevant codes in effect during the review period, ACJA § 6-201.01(K) and ACJA § 6-202.01(N) and (O), which requires residence verification timeframes based on supervision level. At the time of this operational review, cases sentenced prior to January 11, 2017 were reviewed per Statute and Code in effect during that time, which did not require verification within a specific timeframe.

A review of 33 SPS and 1 IPS sex offender case records was conducted. Information in the case file and APETS revealed the following:

Sex Offenders						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
Initial home visit must occur within 30 days (SPS) and 10 days (IPS)	22	12	0	34	65%	N
Registration within 10 days	11	1	¹ 22	34	92%	Y
Address/name change notification change within 72 hours	13	1	20	34	93%	Y
Yearly identification	12	5	17	34	71%	N
Treatment Referral to a contracted provider	33	1	0	34	97%	Y
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming ISC	22	5	² 7	34	81%	N

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Sex Offenders						Meets Standard
Requirements	Yes	No	N/A	Total Cases	% Compliance	
If it is not the probationer's 1st felony offense did the officer, confirm DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming ISC	1	1	² 32	34	50%	<input type="checkbox"/> N
DNA screen completed in APETS	33	1	0	34	97%	<input checked="" type="checkbox"/> Y

¹N/A includes initial registrations prior to previous operational review or not required to register.

²N/A includes offenders whose DNA was collected by DOC or another department.

Noteworthy: The Department achieved compliance in four of the eight review areas.

Department Response: “Unfortunately, the Department was encountering serious programming problems with our contracted vendors as well as personnel related matters immediately preceding the Operational Review. These problems resulted in the replacement of both our contracted treatment provider and our contracted polygraph provider and took considerable staff time to address. Since that time, a new probation officer has assumed supervision of the sex offender caseload and has made great advancements in supervision. Additionally, we will add the above listed questions into the sex offender case file review addendum. Exhibit O.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of a sex offender checklist, use of the Client Ticklers screen in APETS which would provide 90/60/30 days notification for SO ID renewal, supervisory case file reviews, code and statute training to ensure mandatory registration requirements. APETS case notes and other appropriate screens, i.e. Sex Offender Tracking Screen and DNA Screen, should be utilized to document completion of all code and statute requirements.

Global Positioning System (GPS)

Pursuant to A.R.S. § 13-902(G) and AD 2011-41

At the time of the review, the sample of cases was generated and identified three GPS cases. Information in the case file and APETS revealed the following:

GPS						Meets Standard
Requirements	Yes	No	N/A	Total Cases	% Compliance	
GPS attribute marked in APETS	3	0	0	3	100%	<input checked="" type="checkbox"/> Y

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GPS						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
Probationer activated on initial report w/in 72 hours of sentencing/release from custody	1	0	2	3	100%	<input checked="" type="checkbox"/>
Probationer activated upon first face to face with probation officer after Court Ordered Modification	2	0	1	3	100%	<input checked="" type="checkbox"/>
GPS rules signed by probationer	3	0	0	3	100%	<input checked="" type="checkbox"/>
For documented violations, PO initiate immediate response	1	0	2	3	100%	<input checked="" type="checkbox"/>
Responses entered in APETS within 72 hrs.	1	0	2	3	100%	<input checked="" type="checkbox"/>
If absconder, PTR with 72 hours	0	0	3	3	100%	<input checked="" type="checkbox"/>

Noteworthy: The Department did an outstanding job in achieving 100 percent compliance in all review areas.

Department Response: None required

Required Corrective Action: None required

Recommendation: Continue the great work in these review areas.

Signed Review/Acknowledgement of Terms and Conditions

Pursuant to Arizona Rules of Criminal Procedure 27.1

A review of 78 SPS case records and 44 IPS case records was conducted. Information in the case files revealed the following:

Summary of Review and Acknowledgement forms					
Type of Probation	Yes	No	Total	% Compliance	Meets Standard
SPS	76	2	78	97%	<input checked="" type="checkbox"/>
IPS	44	0	44	100%	<input checked="" type="checkbox"/>

Noteworthy: The Department did an awesome job in achieving compliance in both review areas.

Department Response: None required

Required Corrective Action: None required

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Recommendation: The quality assurance procedure may include the utilization of a New Client checklist to ensure that initial contact with probationers results in minimum code and statute requirement compliance.

DNA

Pursuant to **A.R.S. §13-610(C), (D), (G through O)**

A review of 78 SPS case records and 44 IPS case records was conducted. Information in the case files and APETS revealed the following:

SPS DNA

SPS DNA Secured/Transmitted/Verified within 30 days	
Yes	7
No	6
N/A ¹	65
Total	78
% Compliance	54%
Meets Standard	N

¹N/A includes misdemeanor dispositions, another agency/county responsible for DNA being secured/transmitted/verified or DNA would have been confirmed in an earlier operational review

SPS DNA Confirmed	
If not probationer's 1st felony offense or DNA was previously secured/transmitted and verified by another agency did the officer, confirm DNA was in the DPS databank within 30 days of being placed on probation or acceptance of ISC	
Yes	30
No	30
N/A ¹	18
Total	78
% Compliance	50%
Meets Standard	N

¹N/A includes misdemeanor dispositions, or case was a 1st offense

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IPS DNA

IPS DNA Secured/Transmitted/Verified within 30 days	
Yes	6
No	4
N/A ¹	34
Total	44
% Compliance	60%
Meets Standard	N

¹N/A includes misdemeanor dispositions, another agency/county responsible for DNA being secured/transmitted/verified or DNA would have been confirmed in an earlier operational review

IPS DNA Confirmed	
If not the probationer's 1st felony offense or if DNA was previously secured/transmitted and verified by another agency did the officer, confirm DNA was in the DPS databank within 30 days of being placed on probation or acceptance of ISC	
Yes	19
No	14
N/A ¹	11
Total	33
% in Compliance	58%
Meets Standard	N

¹N/A includes misdemeanors, another agency/county responsible for DNA being secured/transmitted/verified or confirmed in an earlier operational review

Noteworthy: Not applicable

Department Response: “While the Operational Review Team was onsite, Department leadership identified that we had an incorrect interpretation of the expectations for collection and verification. Immediately following the receipt of that information, Deputy Chief Michelle Hart held a field meeting on January 31, 2019. The expectations were clarified, and officers are now held to the standards. Further, the case file review checklist has been updated to reflect the correct interpretation of DNA collection. Exhibits K and M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of a New Client checklist, APETS Application External Reports QA DNA001-Client DNA Verification, supervisory case file reviews, Code and Statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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VICTIMS' RIGHTS

Pursuant to ACJA § 6-103(E)(4), A.R.S. §§ 13-4415 (A)(1-3) and 13-4415 (B)(1-5)

A review of 78 SPS case records and 44 IPS case records was conducted. Information in the case files and APETS revealed the following:

SPS Victim Contacts

SPS - Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	32	4	1
No	0	28	0
N/A	46	NA	77
Total	78	32	78
% Compliance	100%	N/A	100%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

IPS Victim Contacts

IPS – Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	26	2	1
No	0	24	1
N/A	18	18	42
Total	44	44	44
% Compliance	100%	N/A	50%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Noteworthy: The Department did a great job in achieving 100 percent compliance in three of the six review areas.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Reviews – Exhibits K and M.”

Required Corrective Action: None required

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Recommendation: The quality assurance procedure may include the utilization of a Victim Notification checklist, supervisory case file reviews, Code and Statute training, along with running the APETS Victim Report in external reports. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

OFFENDER ACCOUNTABILITY

The enforcement of court-ordered financial obligations such as restitution and probation service fees (PSF) and community restitution orders (CRO) are integral parts of probation supervision, the absence of which undermines probationer accountability and mitigates the sentence imposed. During the operational review, intensive and standard probation case files were reviewed to assess the department's enforcement of financial obligations and CROs.

SPS Financials

Pursuant to **ACJA § 6-103(E)(4)(I), A.R.S. § 13-901**

A review of 78 case records was conducted. Information in the case file/financial file/APETS and information from the department revealed the following:

Standard Probation Service Fees (PSF)	
Requirement Met	Delinquency Addressed
Yes	27
No	34
N/A	17
Total	78
% in Compliance	44%
Meets Standard	N

The following table is for informational purposes only:

Standard Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	8
No	61
N/A	9
Total	78
% Compliance	N/A
Meets Standard	NA

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A review of 78 case records was conducted. Restitution was ordered in 4 of the 78 cases. Information in the case file/financial file/APETS and information from the department revealed the following:

Standard Restitution			
Requirement Met	Restitution Current	Court Notified	Opted in Victim Notified
Yes	3	1	0
No	1 ¹	0 ¹	0 ²
Total	4	1	0
% Compliance	N/A	100%	N/A
Meets Standard	NA	Y	NA

¹Court/victim notification documentation of delinquent restitution not found in case file or Contacts/Case Notes in APETS.

²Victim not opted in.

Noteworthy: The Department did a great job in achieving 100 percent compliance in the Standard Restitution - Court Notified review area.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review Standard 2019 Master – Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include scheduled refresher training and regular supervisory case file reviews to ensure efforts regarding enforcement of financial orders. APETS case notes should be utilized to document completion of all code and statute requirements, i.e. the monitoring and immediate address of any arrearage.

IPS Financials

Pursuant to ACJA § 6-103(E)(4)(i) and A.R.S. § 13-901

Intensive Probation Service Fees (PSF)	
Requirement Met	Delinquency Addressed
Yes	28
No	9
N/A	0
Total	37
% in Compliance	76%
Meets Standard	N

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The following table is for informational purposes only:

Intensive Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	7
No	37
N/A	0
Total	44
% in Compliance	N/A
Meets Standard	NA

A review of 44 case records was conducted. Restitution was ordered in one of the 44 cases. Information in the case file/financial file/APETS and information from the department revealed the following:

IPS Restitution			
Requirement Met	Restitution Current	Court Notified	Opted in Victim Notified
Yes	1	0	0
No	0 ¹	0 ¹	0 ¹
Total	1	0	0
% Compliance	N/A	N/A %	N/A %
Meets Standard	NA	NA	NA

¹Court/victim notification of delinquent restitution not found in files/no documentation Contacts/Case Notes in APETS. Restitution is “delinquent” where payments are in arrears two or more months.

Noteworthy: Not applicable

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review IPS 2019 Master – Exhibit M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include scheduled refresher training and regular supervisory case file reviews to ensure efforts regarding enforcement of financial orders. APETS case notes should be utilized to document completion of all code and statute requirements, i.e. officer monitoring and immediately addressing any arrearage.

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SPS Community Restitution (CR) Hours

Pursuant to ACJA §§ 6-201.01(J)(1)(h), 6-201.01(K)(5)(d), (7)(c), and (8)(d)

A review of 78 case records was conducted. A monthly breakdown of CR hours compliance for the review period is illustrated below:

SPS Monthly Community Restitution Requirement Met				
CR Hours Completed	September 2018	October 2018	November 2018	Delinquency Addressed
Yes	1	3	1	2
No	3	1	3	2
N/A ¹	74	74	74	74
Total	78	78	78	78
% Compliance	25%	75%	25%	50%
Meets Standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹CR hours were: not ordered, discretionary, or completed prior to the review period.

Noteworthy: Not applicable

Department Response: “The Department appreciates the recommendation to utilize the APETS reporting feature to provide a quality assurance process for ensuring that Community Restitution hours are being completed and enforced by the probation officer. As a result of this recommendation, the Department is adding a step to our monthly statistics and quality assurance review. The Department’s APETS/Statistics Coordinator will include the QA report to officers, supervisors and management for review, along with the entire stats packet. Officers/Supervisors will be asked on a monthly basis to review the QA report and ensure hours are being completed. Further, the case file review contains the required questions to ensure this process is being reviewed for each probation officer. See attached updated APETS/Statistics Coordinator procedures and case file review template. Exhibit P”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of APETS Report Application CWS (Community Restitution) Report, supervisory case file reviews, Code and Statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

IPS Community Restitution (CR) Hours

Pursuant to A.R.S. § 13-914(E)(6), and ACJA § 6-202.01(I)(1)

A review of 44 case records was conducted. A monthly breakdown of CR hours compliance for the review period is illustrated below:

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IPS Monthly Community Restitution Requirement Met				
Hours Completed	September 2018	October 2018	November 2018	Delinquency Addressed
Yes	13	13	12	24
No	16	18	16	3
N/A ¹	15	13	16	17
Total	44	44	44	44
% Compliance	45%	42%	43%	89%
Meets Standard	N	N	N	N

¹probationer was in prison, jail, treatment, hospital, missing, or CR hours were waived

Noteworthy: Not applicable

Department Response: “The Department appreciates the recommendation to utilize the APETS reporting feature to provide a quality assurance process for ensuring that Community Restitution hours are being completed and enforced by the probation officer. As a result of this recommendation, the Department is adding a step to our monthly statistics and quality assurance review. The Department’s APETS/Statistics Coordinator will include the QA report to officers, supervisors and management for review, along with the entire stats packet. Officers/Supervisors will be asked on a monthly basis to review the QA report and ensure hours are being completed. Further, the case file review contains the required questions to ensure this process is being reviewed for each probation officer. See attached updated APETS/Statistics Coordinator procedures and case file review template. Exhibit P.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of APETS Report Application CWS (Community Restitution) Report, supervisory case file reviews, Code and Statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

CASE MANAGEMENT

SPS Residence and Employment Verification

The relevant Code in effect during the review period, ACJA § 6-201.01(K), requires residence verification timeframes based on supervision level but employment verification is also necessary. At the time of this Operational Review, cases sentenced prior to January 11, 2017 were reviewed per Statute and Code in effect during that time, which did not require verification within a specific timeframe. However, best practice indicates this should be completed within 30 days of sentencing/release from custody as it will provide the officer with insight into a probationer’s needs and overall situation.

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Not all probation officers use the Employment History screens in APETS to document the date verified for employment verification. Therefore, the operational review team read through the contact notes for each case to determine compliance.

The following table shows the number of residence and employment verifications conducted for the 78 case records reviewed (73 high and medium risk, 5 low risk).

Standard Supervision – Residence & Employment Verification			
	Residence Verification w/in 30 Days (High and Medium Risk)	Residence Verification w/in 60 Days (Low Risk)	Employment Verification as Necessary
Yes	54	3	37
No	14	0	5
N/A	10	75	36
Total	78	78	78
% Compliance	79%	100%	88%
Meets Standard	N	N	N

¹NA includes verifications completed prior to previous operational review or offenders who had a change in supervision level.

Noteworthy: The Department did a great job in achieving 100 percent compliance in the Residence Verification (Low Risk) review area.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review Standard 2019 Master – Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of a New Client checklist, the Client Ticklers screen in APETS which would assist in providing set notifications to complete required tasks, APETS QA Reports, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS OST/FROST Timeline Compliance

Pursuant to ACJA §§ 6-201.01(J)(5)(a)(1) and 6-105.01(E)(2)(b)(1)(g)

At the time of this operational review, cases sentenced prior to January 11, 2017 were reviewed per Code in effect during that time which required a reassessment every 180 days. Cases sentenced on or after January 11, 2017 were reviewed per current Code which requires a reassessment 12 months from the initial assessment.

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The results for the 78 SPS case records reviewed are listed in the table below.

Offender Screening Tool (OST) Completed within 30 days	
Yes	51
No	8
N/A ¹	19
Total	78
% Compliance	86%
Meets Standard	<input type="checkbox"/>

¹N/A includes cases with a probation start date prior to previous operational review or initial assessment completed by another department.

The results for the 78 SPS case files reviewed are listed in the table below:

Reassessment (FROST)¹ per Code prior to 1/11/17 or Code requirement on or after 1/11/17	
Yes	46
No	38
N/A ²	307
Total	391
% Compliance	55%
Meets Standard	<input type="checkbox"/>

¹The FROSTs for the past three years were reviewed.

²N/A includes reassessments completed by another department, reviewed during a previous op review, or not required during this op review period.

Noteworthy: Not applicable

Department Response: “Historically, the Department has used an OST/FROST and Case Plan template form when the supervisor was aware that the Officer was delinquent in the completion of these items. We are changing this process and will now ask all officers to complete the form. A field meeting was held on April 29, 2019 and Deputy Chief Michelle Hart reviewed this expectation with staff. See attached OST/FROST and Case Plan form. Exhibit Q.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the Client Ticklers screen in APETS which would assist in providing 90/60/30-day notifications to complete assessments, APETS QA Reports, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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SPS Assessment Score Matching Supervision Level

Pursuant to **ACJA § 6-105.01(E)(2)(b)(1)(c)**

The team reviewed supervision levels of the selected cases to determine if they agreed with assessment or reassessment scores. The post-sentence supervision assignment sheet (updated in January 2010) requires that assessment scores of 0-5 (males) and 0-8 (females) be supervised under standard, minimum supervision requirements. Assessment scores of 6-17 (males), 9-20 (females) will be supervised under the standard, medium supervision requirements, and assessment scores of 18 and higher (males) and 21 and higher (females) will be supervised under the standard, maximum supervision requirements.

Each of the 78 SPS cases were compared to the above standards using the current supervision level and OST/FROST. The results are outlined below:

Supervision Level Matches Assessment Scores for Standard Supervision			
Requirement Met	Maximum	Medium	Minimum
Yes	11	52	4
No	2	8	1
Total	13	60	5
N/A ¹	0	0	0
% in Compliance	85%	87%	80%
Meets Standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹Most recent risk score was not in the case file and/or APETS

Noteworthy: Not applicable

Department Response: “The Department’s case file review process has been updated to include this question. See attached case file review. Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of APETS Report Application County Population by Risk Report, supervisory case file reviews, code and statute training. APETS case notes should be utilized to document overrides and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Case Plan

Pursuant to **ACJA §§ 6-201.01(J)(5)(a)(4), 6-201.01(J)(5)(a)(7-8), and 6-201.01(J)(1)(I)**

At the time of this operational review, cases sentenced prior to January 11, 2017 were reviewed per Code in effect during that time, which required a follow-up case plan every 180 days. Cases

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sentenced on or after January 11, 2017 were reviewed per current Code, which requires a follow-up case plan, 12 months from the initial case plan. An important aspect of case planning is to ensure that probationers are included in the development of goals and strategies. The probationer is a valuable resource in identifying solutions to the needs targeted on the OST or FROST. Minimum level supervision cases were reviewed to determine if a case plan was completed if required.

The table below shows the department's compliance regarding an initial case plan and follow-up case plans. Of the 78 cases reviewed, 5 were minimum level supervision cases.

SPS Case Plans ¹						Meets Standard
Requirements	Yes	No	N/A ²	Total	% Compliance	
Initial completed within 60 days	21	40	17	78	34%	<input type="checkbox"/> N
Follow-up completed per Code prior to January 11, 2017 or per current Code as of January 11, 2017	29	35	321	385 ³	45%	<input type="checkbox"/> N
If minimum supervision level, was a case plan completed as required	2	0	76	78	100%	<input checked="" type="checkbox"/> Y

¹The CP for the past three years were reviewed for each applicable case file.

²Another agency/county responsible for initial CP, and/or follow-up CP, CP not necessary for the applicable case and/or CP not necessary at the time of the operational review or would have been verified in an earlier operational review.

³Follow-up CP completed as required per individual case.

Noteworthy: The Department did an excellent job documenting a case plan, as needed, for minimum level supervision cases.

Department Response: "Historically, the Department has used an OST/FROST and Case Plan template form when the supervisor was aware that the Officer was delinquent in the completion of these items. We are changing this process and will now ask all officers to complete the form. A field meeting was held on April 29, 2019 and Deputy Chief Michelle Hart reviewed this expectation with staff. See attached OST/FROST and Case Plan form. Exhibit Q."

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the Client Ticklers screen in APETS which would assist in providing 90/60/30day notifications to complete case plans, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Case Plan Signatures

Pursuant to ACJA § 6-201.01(J)(5)(a)(4)

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Case plan signatures indicate the probationer and supervising officer are aware of the goals to be addressed during each contact and that the probationer participated in the case planning. The results for the 78 SPS case files reviewed are displayed below:

Most Recent Case Plan Contains Required Signatures	
Yes	61
No	3
Total	64
N/A ¹	14
% Compliance	95%
Meets Standard	<input checked="" type="checkbox"/>

¹N/A includes low risk not needing a CP and cases not containing a current CP

Noteworthy: The Department did a very good job ensuring the required signatures were on the most recent case plan.

Department response: None required

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include supervisory case file reviews, code and statute training.

SPS Low Risk Annual Review

Pursuant to **AJCA 6-201.01(J)(5)**

The table below shows the department's compliance regarding case file reviews for probationers assessed as low risk. Of the 78 cases reviewed, 5 were minimum level supervision cases.

SPS Low Risk Supervision Level Annual Review	
Yes	5
No	0
Total	5
N/A	73
% Compliance	100%
Meets Standard	<input checked="" type="checkbox"/>

Noteworthy: The Department did a commendable job achieving 100 percent compliance in this review area.

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Department response: None required

Required Corrective Action: None required

Recommendation: Continue the great work in this review area.

IPS

Photo in File

Pursuant to ACJA § 6-202.01(P)(2)(c)

Verification of Employment

Pursuant to ACJA § 6-202.01(N)(3)(b), (4)(b), (5)(b), (6)(b)

Verification of Job Search and Verification of Community Restitution

Pursuant to A.R.S. § 13-914(E)(1) and A.R.S. § 13-914(E)(6)

Verification of Residence

Pursuant to ACJA § 6-202.01(N)(3)

During the review period (cases sentenced prior to January 11, 2017), there is no statute, code, or departmental policy regarding IPS residence verification.

Intensive Probation Cases				
Requirement Met	Photo in File	Employment Verified w/in 10 Days	Job Search/CR Verification	Residence Verified w/in 10 Days
Yes	44	26	1	39
No	0	7	5	2
Total	44	33	6	41
N/A	0	11 ¹	38 ²	3 ³
% Compliance	100%	79%	17%	95%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

¹N/A includes job search or disabled probationers

²N/A includes employed, full-time student, in treatment

³N/A includes reinstatements to IPS or sentenced prior to 3/11/2017

Noteworthy: The Department did a very good job ensuring a photo of the probationer was in the case file, and the residence was verified within 10 days.

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Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review IPS 2019 Master – Exhibit M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include development and utilization of an IPS checklist, the use of APETS QA Reports, supervisory case file reviews, Code and Statute training. APETS case notes and other appropriate screens should be utilized to document completion of all Code and Statute requirements.

Verification of IPS Schedules

Pursuant to **A.R.S. § 13-914(E)(4)**

For the three-month period as noted in the table below, 44 files were reviewed for the presence of probationers’ schedules. At the time of this review, to be counted as completed for the month, schedules for all four weeks must have been completed in detail and in the case file.

IPS Schedules Submitted			
Four Schedules/Month	September 2018	October 2018	November 2018
Yes	30	33	28
No	1	1	1
Total	31	34	29
N/A ¹	13	10	15
% Compliance	97%	97%	97%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

¹N/A refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

Noteworthy: The Department did a great job in achieving 97 percent compliance in all review areas.

Department Response: None Required

Required Corrective Action: None required

Recommendation: Please continue to ensure that probationer contacts result in minimum code and statute requirement compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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IPS OST/FROST and Case Plan

Pursuant to ACJA §§ 6-105.01(E)(2)(b)(1)(a), 6-105.01(E)(2)(b)(1)(g), 6-202.01(L)(2)(c), 6-202.01(L)(2)(h), and 6-202.01(L)(2)(c)

Per the January 11, 2017 code revision, initial assessments and reassessments completed on or after this date were reviewed using the 30 days/12-month requirement. Initial assessments and reassessments completed prior to January 11, 2017 were reviewed according to the 30 days/180-day requirement.

A review of 44 case files revealed the following:

Requirement Met	Initial Assessment (OST) w/in 30 days or at PSI	Reassessment (FROST) ¹ per Code prior to 1/11/17 or Code on or after 1/11/17
Yes	39	21
No	0	9
N/A ²	5	234
Total	44	264
% Compliance	100%	70%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>

¹The FROSTs for the past three years were reviewed.

²N/A includes offenders reinstated to IPS or OST completed by another agency/department.

IPS Case Plans ¹							Meets Standard
Requirements	Yes	No	N/A ²	Total	% Compliance		
Initial completed within 30 days	16	23	5	44	41%		<input type="checkbox"/>
Follow-up completed per Code requirement prior to 1/11/17 or Code requirement on or after 1/11/17	3	7	210	220	30%		<input type="checkbox"/>
Required signatures obtained	38	5	1	44	88%		<input type="checkbox"/>

¹The case plans for the past three years were reviewed.

²Another agency/county responsible for initial case plan, and/or follow-up case plan, case plan not necessary for the applicable case and/or case plan not necessary at the time of the operational review or would have been verified in an earlier operational review.

Noteworthy: The Department did an excellent job in achieving 100 percent compliance in the Initial Assessment review area.

Department Response: “Historically, the Department has used an OST/FROST and Case Plan template form when the supervisor was aware that the Officer was delinquent in the completion of these items. We are changing this process and will now ask all officers to complete the form. A field meeting was held on April 29, 2019 and Deputy Chief Michelle Hart reviewed this expectation with staff. See attached OST/FROST and Case Plan form. Exhibit Q.”

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Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the Client Ticklers screen in APETS which would assist in providing 90/60/30day notifications to complete case plans, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Incoming Interstate

Pursuant to ACJA § 6-204.01(J)(5)(a), A.R.S § 31-467.06, and Interstate Commission for Adult Offender Supervision (ICAOS) Rule 4.106(a), ICAOS Rule 3.103 (c) and Rule 3.106 (b)

The table below lists the results of the review of 25 incoming ISC cases files.

ISC Incoming						
Requirements	Yes	No	N/A	Total	% Compliance	Meets Standard
Were the Arizona Conditions Signed	19	6	0	25	76%	N
Is VCAF on Arizona Terms & Conditions	11	14	0	25	44%	N
Sending State's Terms & Conditions in	22	3	0	25	88%	N
Interstate Tracking Screen Completed in	25	0	0	25	100%	Y
ISC Status Accurate in APETS (Accepted,	24	1	0	25	96%	Y
If VCAF collections are not current, has	6	18	1	25	25%	N
the PO addressed						
DNA Collected Within 30 Days	7	9	9	25	44%	N
OST Within 30 Days of Arrival or	12	13	0	25	48%	N
ICP Within (60 days for SPS and 30 days	9	13	3	25	41%	N
for IPS) of Arrival or Acceptance						

For Informational purposes only in relation to VCAF monies owed to Arizona

ISC Incoming Monies Owed	Yes	No	N/A	Total	% Compliance
Are VCAF collections current	2	23	0	25	8%

Noteworthy: The Department achieved compliance in two of the nine review areas, specifically, 100 percent and 96 percent compliance respectively.

Department Response: “We realized as a part of this Operational Review that we did not have a consistent way of implementing VCAF for incoming cases. As a result, a new implementation form was created. Exhibit R.

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Further, in 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review Standard 2019 Master – Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include utilization of an Incoming ISC checklist, the use of APETS QA Reports, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Outgoing Interstate

Pursuant to **ACJA § 6-204.01(J)(5)(a)**

The table below lists the results of the review of 30 Outgoing ISC case records.

ISC Outgoing						Meets Standard
Requirements	Yes	No	N/A	Total	% Compliance	
ISC status accurate (accepted, closed, etc.), ICOTS & APETS match	30	0	0	30	100%	Y
Did probationer leave with valid reporting instructions	30	0	0	30	100%	Y
Did the PO respond to violation reports within 10 business days	4	0	26	30	100%	Y
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or prior to departing from AZ through ISC	14	2	14	30	88%	N
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or prior to departing from AZ through ISC	13	1	16	30	93%	Y
DNA screen completed in APETS	29	1	0	30	97%	Y

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ISC Outgoing						Meets Standard
Requirements	Yes	No	N/A	Total	% Compliance	
Was the Opted-in Victim notified of ISC and any other probation status issues	1	0	29	30	100%	<input checked="" type="checkbox"/>

Noteworthy: The Department did an excellent job in achieving compliance in six of the seven review areas, with 100 percent compliance in four of the seven areas.

Department Response: “While the Operational Review Team was onsite, Department leadership identified that we had an incorrect interpretation of the expectations for collection and verification. Immediately following the receipt of that information, Deputy Chief Michelle Hart held a field meeting on January 31, 2019. The expectations were clarified, and officers are now held to the standards. Further, the case file review checklist has been updated to reflect the correct interpretation of DNA collection. Exhibits K and M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include out-of-state address notification during PSI, development and utilization of an Outgoing ISC checklist which includes victim notification, DNA collection, travel permit, etc., the use of APETS reports such as QA DNA001-Client DNA Verification and APETS QA Reports, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

For informational purposes only in relation to Court monies owed to Arizona

Outgoing ISC Monies Owed	Yes	No	N/A	Total	% Compliance
Is money owed to Arizona	19	11	0	30	63%
Are payments current	2	17	11	30	11%

Noteworthy: Not applicable

Department response: None required

Required Corrective Action: None required

Recommendation: Although the team could not determine whether officers were following up with probationers regarding payments, the Department may want to establish a review process for probationer payments. The following is recommended to help establish a review process for payments, officers assigned to monitor outgoing accepted probationers for the department need to run financials every 60 days, more frequently for probationers who owe victim restitution, and if an offender is in arrears do the following:

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- Check ICOTS for address and employment information and attempt to contact the probationer
- Follow local policies and procedures for sending a letter, etc. to make the probationer aware of his court-ordered financial obligations, resend payment balances, monthly amount due, address where to mail the payment, etc.
- In compliance with ACJA, memo the court for all probationers who are 60 days or more in arrears in restitution payments
- Submit a Compact Action Request via ICOTS to the receiving state to request assistance with the offender pursuant to ICAOS Rule 4.108 b.
- If after all attempts to collect monies have failed, memo the local court to ascertain whether a status hearing or revocation hearing is appropriate and consider a discretionary retaking under Rule 5.101

Closed

Pursuant to A.R.S. §§ 12-253 (2) and (7), 13-4415 (A)(1-3), 13-4415 (B)(1-5), 13-610(C), (D) and (G through O), 13-902(C), 13-805(A)(1)(2), and ACJA § 6-201.01(J)(5)(a)(12)

The table below list the results of the 30 cases that were reviewed:

Closed Cases						
Requirements	Yes	No	N/A	Total	% Compliance	Meets Standard
Warrant Check Before Termination	1	23	6	24	4%	N
Court Ordered Treatment Completed	22	0	8	22	100%	Y
Order of Discharge in file	24	0	6	24	100%	Y
Restitution Owed at Closure	0	6	24	6	N/A	NA
Extended for Restitution	0	0	30	0	N/A	NA
Other financial terms owed at closure	19	11	0	30	N/A	NA
CRO Entered for Outstanding Financial Balances	18	1	11	19	95%	Y
Opted-In Victim Notified of Closure	0	0	30	0	N/A	NA
CR hours required by Statute completed by Closure	5	1	24	6	83%	N
DNA collected/verified	8	0	22	8	100%	Y

Noteworthy: The Department did a very good job in achieving compliance in eight of the ten review areas, with 100 percent compliance in three of the ten review areas.

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Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Reviews – Exhibits K and M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a Closed Case checklist, the use of the Client Ticklers screen in APETS which would assist in providing 90/60/30-day notifications to run warrant checks, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

TREATMENT SERVICES

SPS Treatment Referrals

Pursuant to **ACJA § 6-201.01(J)(5)(b)**

A review of 78 case records was conducted. Information in the case file and APETS revealed the following:

SPS Treatment Referral	
Requirement Met	Referral w/in 60 days
Yes	68
No	2
N/A	8
Total	78
% Compliance	97%
Meets Standard	<input checked="" type="checkbox"/>

Noteworthy: The Department did a great job achieving 97 percent compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue to ensure that initial contact with probationers results in minimum code and statute requirement compliance. Adherence to APETS 90/60/30-day notifications will also assist in continued compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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IPS Treatment Referrals

Pursuant to ACJA § 6-202.01(L)(2)(o).

A review of 44 case records was conducted. Information in the case file and APETS revealed the following:

IPS Treatment Referral	
Requirement Met	Referral w/in 30 days
Yes	38
No	2
N/A	4
Total	44
% Compliance	95%
Meets Standard	<input checked="" type="checkbox"/>

Noteworthy: The Department did a very good job achieving 95 percent compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Please continue to ensure that initial contact with probationers results in minimum code and statute requirement compliance. Adherence to APETS 90/60/30-day notifications will also assist in continued compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Transferred Youth

A transferred youth (TY) is a juvenile who committed an offense and was:

- a. Transferred to the adult court via a transfer hearing or
- b. Charged in the adult court (direct filed) while still a juvenile.

There are no ACJA codes or directives regarding TY. However, the AOC and the probation departments are working on developing guidelines for supervision of youthful offenders (based on evidence-based practices) to assist the departments in addressing the needs of this population.

Statutes relating to TY are: A.R.S. §§ 8-322, 8-327, 13-501, 13-504, 13-921, 13-923, 13-3821, 13-3822, 8-302, and 13-350.01

ACJA Codes relating to transferred youth on probation: ACJA §§ 6-201.01, 6-202.01 and 6-105.01

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A review of 5 case records was conducted. Information in the case file and APETS revealed the following:

Transferred Youth						Meets Standard
Requirements	Yes	No	N/A	Total	% Compliance	
OST within 30 days	5	0	0	5	100%	<input checked="" type="checkbox"/>
FROST within 180 days (12 months)	1	0	4	5	100%	<input checked="" type="checkbox"/>
Initial case plan within 60 days of sentencing/release from custody/acceptance	3	1	1	5	75%	<input type="checkbox"/>
Risk score agree with supervision level	5	0	0	5	100%	<input checked="" type="checkbox"/>
Was treatment court ordered	3	0	2	5	100%	<input checked="" type="checkbox"/>
Screened for Title 19 or 21 (AHCCCS)	2	3	0	5	40%	<input type="checkbox"/>

For informational purpose only, not a compliance issue.

Summary	Yes	No	Total	N/A	% Compliance
Probationer has GED/high school diploma	1	4	5	0	20%
Enrolled in school	1	3	4	1	25%
Enrolled in GED classes	0	4	4	1	0%
Employed	4	1	5	0	80%
Was treatment completed	3	2	5	0	60%
Positive reinforcements used	0	1	1	4	0%
Intermediate sanctions used	2	1	3	2	67%
Petition to Revoke (PTR) filed	1	0	1	4	100%
Incarcerated as a result of PTR	1	0	1	4	100%
Is the probationer a sex offender	0	5	5	0	N/A
If yes, has an annual court hearing (only for sex offenders) been requested by the probationer	0	0	0	5	N/A

Noteworthy: The Department did an excellent job in achieving 100 percent compliance in four of the six required review areas.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a

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newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Reviews Standard and IPS 2019 Master – Exhibit K and M.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a New Client checklist, APETS QA Reports, the use of the Client Ticklers screen in APETS which would assist in providing notification to address education and treatment needs, supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Drug Testing

Pursuant to **ACJA § 6-201.01 (J)(1)(f)**

A review of 78 case records was conducted. Information in the case file and APETS revealed the following:

SPS Drug Testing		
Requirement Met	Frequency Described in Case Plan/Record	Completed as Described
Yes	32	32
No	17	0
N/A	29	46
Total	78	78
% Compliance	65%	100%
Meets Standard	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Noteworthy: The Department did a very good job achieving 100 percent compliance in one of the two review areas.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Reviews Standard Master – Exhibit K.”

Required Corrective Action: None required

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Recommendation: Officer refresher training will reinforce the requirement of documenting the frequency of drug testing in the probationer's case plan and supervisory case file reviews would assist in ensuring that case plan requirements are met.

IPS Drug Testing

Pursuant to ACJA § 6-202.01(L)(2)(e)

A review of 44 case records was conducted. Information in the case file and APETS revealed the following:

IPS Drug Testing		
Requirement Met	Frequency Described in Case Plan/Record	Completed as Described
Yes	27	27
No	2	0
N/A	15	17
Total	44	44
% Compliance	93%	100%
Meets Standard	Y	Y

Noteworthy: The Department did an excellent job in achieving compliance in the two review areas.

Department response: None required

Required Corrective Action: None required

Recommendation: Officer refresher training will reinforce the requirement of documenting the frequency of drug testing in the probationer's case plan and supervisory case file reviews would assist in ensuring that case plan requirements are met.

Drug Treatment and Education Fund (DTEF)

Pursuant to A.R.S. § 13-901.01, A.R.S. § 13-901.02, ACJA § 6-205(G)(1)(c)

For purposes of the operational review, 27 cases that were considered DTEF cases pursuant to A.R.S 13-901.01 (A)(F) were reviewed.

DTEF Cases	
13-901.01 (A) & (F)	17
13-901.01 (D)	10

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DTEF Cases					
Requirement	Yes	No	N/A	% Compliance	Meets Standard
Mandatory Case (A's & F's): At minimum, received substance abuse education or drug treatment	17	0	10	100%	<input checked="" type="checkbox"/>
AOC approved Ability to pay form completed and in file	7	20	0	26%	<input type="checkbox"/>
Drug treatment or education, referral made within 30 days IPS, 60 days SPS	24	2	1	92%	<input checked="" type="checkbox"/>
DTEF Funded	9	18	0	N/A	<input type="checkbox"/>
Other Methods of Payments	Yes	No	DTEF	% Compliance	Meets Standard
Other methods (AHCCCS, private pay, private insurance, etc.)	13	5	9	N/A	<input type="checkbox"/>

Noteworthy: The Department did a great job achieving compliance in two of the three required review areas.

Department Response: “In 2018, the department revamped our entire case file review process and created an electronic version of a case file review template. Please note that while this is a newer process, our Operational Review results are substantially improved from 2015. Because of the 2018 Operational Review, we have updated several categories of the review process to include areas of deficit. It is anticipated that with these updates and ongoing training and use, we will continue to improve in deficient areas. See Case Review Standard 2019 Master – Exhibit K.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of DTEF Reports/DTEF Report Card in APETS, appropriate screens, i.e. AHCCCS Tracking screen, Client Services/DTEF screen and Initiate Court Data screen, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

ACKNOWLEDGEMENTS

The Adult Probation Services Division (APSD) of the Administrative Office of the Courts (AOC) appreciated the professionalism, collaboration, hospitality, and patience of the Coconino County Adult Probation staff throughout the operational review process.

The operational review team greatly appreciates Coconino County Adult Probation Department's willingness to venture outside the box to discover and test new ways of using technology to streamline the operational review process. Incidentally, many thanks to the Coconino County Adult Probation Department who was the first to pilot the use of technology (Zoom) for MAS and firearms verification. Moreover, the operational review team sincerely appreciates the Chief

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Probation Officer's forward-thinking and willingness to participate in operational review pilots and optional case file review opportunities.

Additional praiseworthy review areas include pre and post-employment practices, staff training, COJET, Review and Acknowledgement signatures, treatment referrals, timely completion of the OST, SPS and Sex Offender contacts, and excellent organization of case files.

The Department submitted a thorough and complete Self-Assessment Questionnaire (SAQ), responded to all questions/requests for additional information, was open and responsive throughout the review process.

Finally, the Department successfully provided an approved plan of corrective action for each area that received a compliance rating of less than 90%. The publication of the Department's Final Report will close the Department's 2019 Operational Review as a follow-up is not required. Congratulations to the Department for a job well done.

COMPLIANCE SUMMARY COMPARISON		
ADMINISTRATION AND MANAGEMENT		
	2019	2015
Employment		
Verification of Bachelor's Degree for PO	96%	100%
Verification of High School Diploma/GED for SO	N/A	N/A
Before hire, National and State Criminal History Check	100%	100%
Before hire, MVD check through Arizona & other States of Residence	46%	100%
Officer Certification/COJET/Training Requirements		
8 Hours of Officer Safety Training within 30 days of Appointment	100%	100%
Completion of PO Certification Academy within 1 Year of Hire Date	100%	100%
Certification Requested by CPO within 1 Year of Active Service	91%	88%
Completion of IPS Academy within 12 months of Assignment	100%	100%
Biannual Criminal History & MVD Check		
Criminal History Check Every 2 Years	100%	93%
Annual MVD Check	100%	88%
Pre-sentence Reports on Time	91%	99%
COMMUNITY PROTECTION		
SPS Supervision Contacts		
Minimum Level	100%	96%
Medium Level	91%	93%
Maximum Level	95%	78%
IPS Supervision Contacts		

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Contacts with Probationers	86%	74%
Contact with Employers	86%	44%
Sex Offender Contacts	95%	N/A
Activity to Locate Before Warrant Issued		
IPS - Warrant Requested within 72 Hours	50%	57%
SPS - Warrant Requested within 3 Months	96%	100%
Residence Checked	67%	55%
Collaterals Checked	63%	76%
Employment Checked	60%	40%
Certified Letter Sent	N/A	46%
Activity of Locate After Warrant Issued		
After warrant issued, a criminal history check done	47%	N/A
Residence Checked	54%	0%
Employment Checked	0%	0%
Opted-In Victim Notified	100%	50%
Annual Records Check	N/A	0%
If warrant after 7/20/2011, CRO Filed within 90 days	32%	22%
Sex Offender Requirements		
Registration within 10 Days	92%	46%
Verify residence within 30 days (SPS), 72 hours (IPS)	65%	N/A
Address/Name Change Notification Change within 72 hours	93%	58%
Yearly Identification	71%	0%
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	81%	38%
If it is not the probationer's 1st felony offense did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	50%	N/A
DNA screen completed in APETS	97%	N/A
Referred to Treatment	97%	91%
GPS Compliance		
GPS attribute marked in APETS	100%	75%
Probationer activated on initial report w/in 72 hours of sentencing/release from custody	100%	33%
Probationer activated upon first face to face with probation officer after Court Ordered Modification	100%	N/A
GPS rules signed by probationer	100%	75%
For documented violations, PO initiate immediate response	100%	100%
Responses entered in APETS within 72 hours	100%	100%
If absconder, PTR with 72 hours	100%	N/A

Signed Review/Acknowledgement of Terms of Conditions

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SPS	97%	97%
IPS	100%	97%

DNA Collection

SPS

Was DNA sample secured/verified within 30 days of being placed on probation or acceptance of incoming	54%	73%
If it is not the probationer's 1st felony offense or DNA was secured by another agency did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	50%	N/A

IPS

Was DNA sample secured/verified within 30 days of being placed on probation or acceptance of incoming	60%	63%
If it is not the probationer's 1st felony offense or DNA was secured by another agency did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	58%	N/A

VICTIMS' RIGHTS

SPS

Pre-sentence Contact	100%	98%
Notice of Changes Given	100%	60%

IPS

Pre-sentence Contact	100%	97%
Notice of Changes Given	50%	57%

OFFENDER ACCOUNTABILITY

SPS Financials

Victim Notified if Restitution Two Months in Arrears	N/A	50%
Court- Notification if Restitution Two Months in Arrears	100%	17%
Probation Supervision Fees (PSF) Current	N/A	N/A
Officers Addressed Financial Delinquencies ¹	44%	34%
¹ (includes PSF and restitution delinquencies)		

IPS Financials

Court Notified if Restitution Two Months in Arrears	N/A	43%
Victim Notified if Restitution Two Months in Arrears	N/A	25%
Restitution Current	N/A	N/A
Probation Supervision Fees (PSF) Current	N/A	N/A
Collection of IPS Probationer Wages	N/A	N/A
Officers Addressed Financial Delinquencies	76%	N/A
¹ (includes PSF and restitution delinquencies)		

SPS CR Hours

Average Completed – 3-month review period	42%	17%
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Officers Addressed Delinquent Hours	50%	38%
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IPS CR Hours

Average Completed – 3-month review period	43%	40%
Officers Addressed Delinquent Hours	89%	31%

CASE MANAGEMENT

SPS Cases

Residence Verification within 30 days of Sentencing/Release from Custody	79%	70%
Initial Employment Verification	88%	53%
OST Completed within 30 Days	86%	94%
FROST Completed per Code	55%	27%
Supervision Level Matches Assessment Scores	84%	85%
Initial Case Plan Completed within 60 Days	34%	50%
Case Plans Completed per Code	45%	18%
PO Strategies for the Probationer and PO	N/A	79%
Measurable Strategies for the Probationer and PO	N/A	35%
Completed Case Plan for Minimum Supervision Level if Necessary	100%	32%
OST/FROST Highest Criminogenic Need Addressed in Case Plan	N/A	98%
Case Plan Signatures	95%	56%
Low Risk Annual Review	100%	N/A

IPS Cases

Photo in File	100%	100%
Verification of Employment within 10 Days	79%	44%
Unemployed & 6 days/week Job Search & CR	29%	39%
Verification of Residence within 10 Days	95%	66%
Collection of Weekly Schedules	97%	53%
Initial Assessment (OST) within 30 Days or at PSI	100%	98%
Reassessment (FROST) Every 180 Days	70%	63%
Initial Case Plan	41%	24%
Case Plans per Code	30%	31%
PO Strategies for the Probationer and PO	N/A	N/A
Measurable Strategies for the Probationer and PO	N/A	N/A
Case Plan Signatures	88%	77%

Incoming ISC Cases

Were the Arizona Conditions Signed	76%	96%
Is VCAF on Arizona Terms & Conditions	44%	100%
DNA Collected Within 30 Days	44%	28%
OST Within 30 Days of Arrival or Acceptance	48%	26%
Initial Case Plan Within 60 days of Arrival or Acceptance	41%	10%
Annual Progress Reports Completed	N/A	88%
Sending State's Terms & Conditions in File	88%	92%
Interstate Tracking Screen Completed in APETS	100%	100%

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ISC Status Accurate in APETS (Accepted, Closed, etc.)	96%	100%
Are VCAF Collections Current	8%	50%
If VCAF Collections Are Not Current, Has PO Addressed	N/A	43%

Outgoing ISC Cases

ISC Status Accurate (Accepted, Closed, etc.)	100%	100%
Did probationer leave with valid reporting instructions	100%	100%
Did the PO respond to violation reports within 10 business days	100%	100%
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of outgoing	88%	100%
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	93%	N/A
DNA screen completed in APETS	97%	N/A

Closed Cases

Warrant Check Before Termination	4%	0%
DNA collected/verified	100%	78%
Court Ordered Treatment Completed	100%	89%
CR Hours Required by Statute Completed by Closure	83%	72%
Opted-In Victim Notified of Closure	N/A	67%
If Restitution Owed at Closure, Extended for Restitution	N/A	N/A
Other Financial Terms Owed at Closure	N/A	73%
CRO Entered for Outstanding Financial Balances	95%	75%

TREATMENT SERVICES

SPS Cases

Treatment Referral within 60 Days	97%	94%
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IPS Cases

Treatment Referral within 60 Days	95%	76%
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Transferred Youth Cases

OST within 30 days	100%	N/A
FROST per code	100%	N/A
Initial case plan within 60 days of sentencing/release from custody/acceptance	75%	N/A
Risk score agree with supervision level	100%	N/A
IPS Level change based on compliance	N/A	100%
Was treatment court ordered	100%	60%
Completed treatment	N/A	20%
Screened for Title 19 or 21 (AHCCCS)	40%	N/A

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SPS Drug Testing

Frequency Described in Case Plan	65%	N/A
Drug Tested as Described in Case Plan	100%	N/A

IPS Drug Testing

Frequency Described in Case Plan	93%	97%
Drug Tested as Described in Case Plan	100%	97%

DTEF Funded Cases

Screened for AHCCCS	N/A	N/A
Client Services Screen in APETS Completed	N/A	25%
Evaluation Completed (Instrument Approved by AOC)	N/A	N/A
Ability to Pay Form Completed and in File	26%	N/A
Did mandatory A' and F's receive a referral for treatment/education	100%	75%